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ABSTRACT

This paper contains recommendations for licensure for individuals working as early childhood special educators in a variety of settings. The fundamental position presented is that a free-standing credentialling process separate from the credentialling of general educators or of special educators is required for people who work with young children, including those with special needs. The paper addresses the uniqueness of early childhood as a developmental phase, the significant role of families in early education and intervention, the role of developmentally and individually appropriate practice, the preference for service delivery in inclusive settings, the importance of culturally competent professional behavior, the importance of collaborative interpersonal and interprofessional actions, a framework for clarifying professional roles, the structure of recommended early childhood special education licensure, content standards for early childhood special education licensure, guidelines for preparation of early childhood special education professionals, and basic guidelines for 4-year and 5-year institutions. (Contains 80 references.) (DB)

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PERSONNEL STANDARDS FOR EARLY EDUCATION AND EARLY INTERVENTION: GUIDELINES FOR LICENSURE IN EARLY CHILDHOOD SPECIAL EDUCATION

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Recommendations of

The Division for Early Childhood, Council for Exceptional Children
The National Association for the Education of Young Children
The Association of Teacher Educators

Overview

This paper contains recommendations for licensure for individuals working as early childhood special educators in a variety of settings serving children ages birth through eight with special needs and their families. It has been developed as a part of the ongoing process of clarifying roles and standards for individuals employed in early education and early intervention. These recommendations build upon and extend the prior separate efforts of The Association of Teacher Educators (ATE), The Division for Early Childhood of the Council for Exceptional Children (DEC), and The National Association for the Education of Young Children (NAEYC) to generate guidelines for licensure in early education and early childhood special education (ATE & NAEYC, 1991a; ATE & NAEYC, 1991b; CEC, 1992; DEC, 1992; McCollum, McLean, McCartan, Odom, & Kaiser, 1989). The recommendations were derived from a commitment to establishing a shared vision among these key professional organizations in early education and early intervention for the credentialling of all individuals working with young children and their families.

This paper has several important features. First, the fundamental position of ATE, DEC, and NAEYC, that a free-standing credentialling process is required for persons who work with young children separate from the credentialling of general educators or of special educators, is strongly supported. Elements of existing position statements from these organizations are incorporated and expanded upon, in response to current indicators of effective practice. Second, the paper offers a conceptual base for identifying the knowledge and skills needed by individuals working with young children, including those with special needs. Third, it provides a framework for clarifying the professional roles in early childhood education and early childhood special education. In particular, the relationship between early childhood educators and early childhood special educators is articulated. Finally, specific content areas around which to organize the licensing of individuals working as early childhood special educators in a variety of community settings are described.

The purpose of this concept paper is to provide guidance to states as they develop personnel standards for early childhood special educators. It is intended that these recommendations be reviewed in the context of several companion documents being developed by ATE, DEC, and NAEYC. These companion documents address standards for early childhood educators and articulate implications and guidelines for higher education programs preparing individuals to work with all young children and their families, including those with special needs.

These recommendations should support increased uniformity and unification in preparation, licensure, and practice of early childhood educators and early childhood special educators across states. However, the recommendations should be seen as flexible enough to be applied to the individual variations in licensure practices and service delivery contexts of each state. Individual states must make decisions about who enters the profession, the length of preservice training, the level at which training must occur, and the degree to which integration of early childhood education and early childhood special education can occur in preparation and licensure.

Specific standards for individuals in related service professions are not articulated in this paper. However, it is the position of ATE, DEC, and NAEYC that all individuals who work with children in early childhood settings must possess, to a degree congruent with their roles, the knowledge and skills for working with young children with special needs (ATE, DEC, NAEYC, 1994). The roles and the unique knowledge and skills required of professionals in related disciplines have been widely discussed (McCollum & Thorp, 1988). Further, a compendium of common core competencies, as well as some discipline-specific competencies can be found elsewhere (Personnel Committee, DEC, 1992). It remains the responsibility of each profession to establish these standards and to relate them to state licensure or credentialling processes.

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Background

There is increasing capacity, nationally, to provide comprehensive, coordinated services for young children with special learning and developmental needs and their families. Federal and state policy initiatives have resulted in more programs for young children in general. With increasing attention to the availability of early education and early intervention services has come recognition of the need to identify standards for practice in providing these services (Bredekamp, 1987; Personnel Committee, DEC, 1992). Further, there is increasing consensus, supported by policy, that the context for service delivery for young children with special needs is the same community setting where their typically developing peers are found. Finally, there is increasing recognition that the changing nature of services to young children requires examination of personnel preparation practices (McCollum & Thorp, 1988; Miller, 1992; Stayton & Miller, 1993). Examination of (a) the structure for licensing individuals who will work in early education and early intervention and (b) the relationship between what often has been seen as the separate fields of early childhood education and early childhood special education is needed (Bredekamp, 1993; Burton, Higgins Hains, Hanline, McLean & McCormick, 1992).

This paper has been developed as a result of a consensus-building process among the ATE, DEC, and NAEYC. It evolved as a result of informal conversations between these professional organizations, in recognition of their overlapping interests in ensuring high quality environments for all young children, including those with special needs. It is an extension of a position statement cooperatively developed by all three organizations, presented for feedback and review to their respective memberships, and approved during 1993-1994 by each organization's executive board (ATE, DEC, NAEYC, 1994).

These professional organizations have long recognized their roles in recommending standards for credentialling individuals who work with young children. ATE and NAEYC have an approved position on licensure of early childhood teachers (ATE & NAEYC, 1991a). In 1991, these organizations began the process of developing guidelines for early childhood special educators that would be congruent with this existing position (ATE & NAEYC, 1991b). DEC has an approved position providing recommendations for licensure of early childhood special educators (ATE, DEC, & NAEYC, 1993) and has compiled professional competencies for early intervention personnel (Personnel Committee, DEC, 1992). Furthermore, the Council for Exceptional Children (CEC) has identified common core knowledge and skills for all special education teachers (CEC, 1992) and is currently engaged in the process of identifying knowledge and skills necessary for teachers to practice within particular specialty areas (CEC, 1993). For the specialty area of early childhood special education, DEC's recommendations for licensure will be incorporated in the CEC documents.

Each of these positions has been used in the development of state credentialling standards (Fore, 1992; Thorp & Fader, 1993). However, there is wide variation in state standards, their existence, the ages of children covered, and the roles and settings to which they apply (Bredekamp, 1993; Thorp & Fader, 1993; NEC*TAS, 1992). Only a few states have adopted licensure standards that demonstrate either a clear relationship between early childhood educators and early childhood special educators or the unification of those fields in a single license (Thorp & Fader, 1993). As standards for practice have been clarified (Bredekamp, 1987, 1994; Bredekamp & Rosegrant, 1992; DEC Task Force on Recommended Practices, 1993), and as children with disabilities receive services in inclusive community settings, it has become clear that there is a need to identify standards to ensure that individuals are available and adequately prepared to work with young children in these new contexts. ATE, DEC, and NAEYC, therefore, acknowledged the need to revisit their current positions and develop a joint position on the qualifications required of all personnel who work with young children, including those with special needs. It is expected that this collaborative process will have several desirable outcomes: (a) the coherence of state credentialling guidelines, including clearer articulation of the roles of early childhood educators and early childhood special educators; (b) congruence between personnel standards and standards of recommended practice in early childhood service delivery; (c) the increased probability that services to young children with disabilities are delivered in the context of services to all young children; and (d) those services are provided by personnel prepared to provide high quality programs appropriate for all young children.

The recommendations contained in this paper support and expand upon the prior positions of ATE, DEC, and NAEYC. The content of the recommended standards are compatible with existing standards. Standards have been elaborated upon, however, to describe outcomes expected of candidates for licensure, to be congruent with categories driving guidelines for NCATE accreditation of teacher education programs, and to incorporate current conceptions of attributes of high quality programs. These recommendations were derived from two sources: (a) an analysis of the roles currently necessary to support early education and early intervention for young children with disabilities in inclusive community settings where typically developing young children are also served and (b) an analysis of the relationship between the role of early childhood educators and early childhood special educators in these settings. In an evolving field, it is essential to modify recommendations for licensure to address those changes. Similarly, the recommendations provided in this paper will require

periodic review and revision.

Conceptual Base Guiding Personnel Recommendations

ATE, DEC, and NAEYC recommend that personnel standards be derived from empirically defensible knowledge and clearly articulated philosophical assumptions about what constitutes effective early education and early intervention for young children with special needs and their families. These areas of consensus represent current recommended practice in the fields of early education and early intervention. This knowledge base and set of philosophical assumptions have, in turn, influenced decisions about the recommended structure and content of certification recommendations.

The Uniqueness of Early Childhood as a Developmental Phase

Early education and early intervention evolved from a belief that the characteristics of development and learning of young children are different from those of older children and adults. Thus, programs serving young children should be structured to support those unique developmental and learning characteristics. The personnel in early childhood programs should have a thorough understanding of the developmental needs of young children and of strategies for structuring a supportive learning environment responsive to those needs (Carta, Schwartz, Atwater & McConnell, 1991; Cataldo, 1984; ATE & NAEYC, 1991a; McCollum et al., 1989). Further, personnel working with young children with disabilities must first recognize that these are young children (Wolery, Strain & Bailey, 1992) and then bring to the intervention process an understanding of the interrelationship between the development of young children and the impact of disability on development and subsequent implications for intervention (McCollum et al., 1989; ATE & NAEYC, 1991a).

For the purposes of this document, early childhood is defined as extending from birth through age eight. This definition has both a theoretical and pragmatic rationale. From a theoretical perspective, development is seen as occurring on a continuum, requiring gradual changes in approaches to instruction as development proceeds (McCollum et al., 1989; ATE & NAEYC, 1991a). A program serving infants and toddlers will look markedly different from one serving children aged 5 through 8; yet each will share underlying organizational principles that contrast starkly with programs for older children.

Pragmatically, there are clear benefits to be derived from linking the entire birth through 8 age range, particularly for the two age extremes--birth to 3 and 5 through 8. Current conceptualizations of effective practice with young children were first proposed as a response to the apparent trend toward downward escalation of curriculum, in particular to the practice of providing formal and academic instruction to young children (Bredekamp, 1987; Bredekamp & Rosegrant, 1992). In order for children in the early primary grades to be taught in a developmentally appropriate fashion, personnel must be prepared to see the link between child development and teaching strategies uniquely structured to respond to that development.

The Significant Role of Families in Early Education and Intervention

Families provide the primary context for young children's learning and development. The central role of families suggests the need for establishing relationships with families that ensure continuity between families and the providers of early education and intervention (Powell, 1994). These relationships should be built upon mutual support of each other's roles, upon a commitment to joint decision-making, and upon respect for families' choices and preferences for their level of involvement (Garshelis & McConnell, 1993; Harry, 1992; McGonigal, Kaufmann & Johnson, 1991; Vincent, Salisbury, Strain, McCormick & Tessier, 1990).

The conception of collaboration with families suggests an active role for families, placing them at the center of the educational process, if that is their choice (McLean & Odom, 1993). It represents a logical evolution of the principles of family involvement that have traditionally characterized early childhood services. Current principles differ from traditional principles in intensity and in an increased focus on engaging families in a mutual relationship via family-centered services, rather than as recipients of professional expertise (Bredekamp, 1993; Hills, 1992; McGonigal et al., 1991). Furthermore, it reflects recent changes in public policy (Beckman, Newcomb, Frank, Brown & Filer, 1991). Part H and, to a lesser extent, Part B of the Individuals with Disabilities Education Act (IDEA, 1990) provide roles for families in assessment, planning, and intervention, as well as in the larger system development process. Family concerns and priorities must be addressed, and intervention must be provided in environments that are meaningful for families (Beckman et al., 1991; McGonigal et al., 1991; Vincent et al., 1990). Professional standards should be developed to ensure effective collaboration with families, derived (a) from an understanding of the experiences of families of young children, including those with disabilities; (b) from a knowledge of specific strategies to establish and maintain productive relationships with families with diverse needs, experiences, and preferences; and (c) from a knowledge of specific legal requirements (Wolery et al., 1992; Beckman et al., 1991).

The Role of Developmentally and Individually Appropriate Practices

Developmentally appropriate practices provide a framework for instructional practices based on the assumption that the opportunities needed for learning and development come primarily from children's active engagement and participation in their environment (Bredekamp, 1987). Thus, developmentally appropriate practices maximize children's opportunities to make choices, value children's interests, and emphasize play and enjoyment. Developmentally appropriate practices encompass practices that are both age-appropriate and individually appropriate. Age-appropriate programs provide for a wide range of interests and abilities within which the chronological age expectation of a typically developing child can be found. Individually appropriate planning is guided by an understanding of the needs and interests of individual children and of the adaptations that may be necessary to enhance learning.

There has been much discussion of the applicability of developmentally appropriate practices to early childhood special education (Bredekamp, 1993; Carta, Atwater, Schwartz, & McConnell, 1993; Carta, Schwartz, Atwater & McConnell, 1991; Mallory, 1992; McCollum & Bair, 1994; McLean & Odom, 1993). Children with and without special needs have been found to be more actively involved in activities they initiate themselves, in contrast to teacher-initiated activities (Diamond, Hestenes, & O'Connor, 1994). However, achieving a broad enough conception of developmentally appropriate practices that are truly relevant for all young children, including those with special needs remains a challenge. For example, when planning for young children with severe disabilities, chronologically, age-appropriate practices may differ markedly from developmentally age-appropriate practices. Yet, in many instances the former are necessary for successful inclusion and for the functional development of that child (McLean & Odom, 1993). Furthermore, teacher behavior might best be viewed as occurring on a continuum from highly directive to facilitative instructional behaviors (Bredekamp & Rosegrant, 1992). In judging the degree of support needed by an individual child, it seems critical first to err on the side of less directive strategies and then to consider what is known about the capacity of an individual child to obtain feedback from the environment and from peers when planning for lesser or greater degrees of support (Bredekamp, 1993; Bredekamp & Rosegrant, 1992; Johnson & Johnson, 1992; McCollum & Bair, 1994). Finally, individually appropriate practices for young children with special needs require actively assessing and planning for individual children. Such planning is based upon strengths, needs, and a clear understanding of environmental adaptations that may be necessary for that child to benefit from the environment.

Personnel standards for the early childhood special educator should ensure skillful application of developmentally appropriate practices with all young children and especially those with special needs. Therefore, standards must address the key dimensions of the continuum of teaching strategies; understanding the role of the child, the role of the environment, the behavioral expectations of typically developing peers, and the role of the professional.

The Preference for Service Delivery in Inclusive Settings

Young children with special needs are increasingly receiving services in integrated settings along with their typically developing peers. Both Part B and Part H of IDEA (1990) support early intervention and education in inclusive settings. Specifically, infants and toddlers must receive services in normalized, natural environments, and preschoolers with special needs must receive services in the least restrictive environment. The regulations for Part H define natural environments as "settings that are natural and normal for the child's age peers who have no disability," including home and community settings. Based on the least restrictive environment principle, states must ensure that

> to the maximum extent appropriate, children with disabilities, including children in public or private institutions and other care facilities, are educated with children who are not disabled, and that special classes, separate schooling, or other removal of children with disabilities from the regular education environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily [IDEA, 1990, 1412(5)].

DEC and NAEYC (1993) identified inclusion as the preferred service delivery option for young children with special needs. This practice of inclusion is based on the belief that young children with special needs are more similar to their peers than different from them, and that all young children benefit from learning together as members of a diverse community. The strength of the movement to provide services to young children in normalized community settings provides the incentive for developing a unified statement on professional standards.

Because inclusion is the preferred option, all professionals working with young children need to be sufficiently knowledgeable about the needs of young children with disabilities and about appropriate interventions with them in order to provide age appropriate and individually appropriate services to all of the children with whom they work. Professionals must also be prepared to work in the diverse range of

community settings in which young children and families receive services. Some professionals now argue that for the full inclusion of infants, toddlers, and preschoolers with special needs to occur personnel preparation programs should combine early childhood and early childhood special education (Bredekamp, 1992; Burton et al., 1992; Miller, 1992; Odom & McEvoy, 1990). In addition, a commitment to inclusionary practices requires the delineation of a range of roles from early childhood educator to early childhood special educator, as well as a delineation of professional standards for these roles.

The Importance of Culturally Competent Professional Behavior

All development and learning occurs within and is influenced by a cultural context. Because of the great diversity within our communities and among and within families, professionals working with young children should be prepared to provide culturally competent services. Arcia, Keyes, Gallagher, and Herrick (1993) reported that approximately 32% of children under age 5 in the United States are of ethnic minority. In some states, this percentage is approaching or has already reached majority status. Research suggests, however, that the majority of early interventionists are Caucasian (Christensen, 1992). Whereas, African Americans are relatively well-represented in the staff of early childhood programs (Kisker, Hoffierth, Phillips, & Farquhar, 1991), they remain the minority of total staff. With this discrepancy between the cultural and ethnic status of consumers and providers of services, it is imperative that specific knowledge and skills be articulated to enable individuals working with young children and families to approach diversity in an effective manner within the context of the service delivery setting.

P.L.102-119 extended services to typically under-served groups, including cultural and ethnic minority groups, by requiring states to develop policies and practices with families that ensure access to culturally competent services within the community. Roberts (1990) defined cultural competence as "a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals to enable that system, agency, or those professionals to work effectively in cross-cultural situations" (p. 15). DEC's recommended practices for personnel competence indicate that cultural and ethnic diversity must be addressed in both didactic program content and through field experiences to prepare professionals to respect the diversity of cultures found in a community through intervention practices and policies (DEC Task Force on Recommended Practices, 1993). To work effectively with culturally diverse families, professionals must be knowledgeable about their own cultural background; acquire general knowledge of specific cultures, including their beliefs about disability, child-rearing practices, and professionals; be aware of the verbal and nonverbal communication styles used in various cultural contexts; understand how their own cultural beliefs and values have an impact on their interactions with families (Christensen, 1992; Hanson, Lynch, & Wayman, 1990; Lynch & Hanson, 1992); and be aware of the impact of policies and practices upon children and families from cultural and ethnic minority groups.

The Importance of Collaborative Interpersonal and Interprofessional Actions

With the implementation of family-centered services and the inclusion of young children with special needs in general community settings, personnel need to be able to work collaboratively with family members, with others in their own discipline, and with individuals from other disciplines as members of teams. IDEA (1990) has provided states with regulations supporting collaboration among disciplines and with families. This shift in service delivery has resulted in the need for early childhood special educators to adjust their roles from the primary role of direct service provider to one of more indirect service delivery, such as, consultant, technical assistant, and staff development specialist (Buysse & Wesley, 1993; File & Kontos, 1992).

In service delivery roles that are even more indirect, the early childhood special educator must possess knowledge and skills required for direct service delivery to consult effectively with colleagues who work on an ongoing basis with children and families. In addition, early childhood special educators must develop skills in building interpersonal relationships, communicating with early childhood educators and related services professionals, and providing technical assistance/training to others (Buysse & Wesley, 1993; File & Kontos, 1992). It is also imperative that the early childhood special educator be knowledgeable about the philosophical base, methodological approaches, and terminology of the disciplines with which collaboration/consultation occur (File & Kontos, 1992; McCollum & Thorp, 1988). The need for this type of knowledge provides a rationale for interdisciplinary preservice training programs. The interagency organization of early childhood services within communities also establishes a rationale for interdisciplinary preservice programs that effectively prepare professionals for collaborative roles.

A Framework for Clarifying Professional Roles

Individuals who work with children in early childhood settings must possess, to a degree congruent with their roles, the knowledge and skills for working with young children with special learning and developmental needs and their families. Personnel standards must support the practice of inclusion, the provision of services for young children with special needs in general early childhood programs and other

community-based settings in which typically developing young children are also served. Personnel standards should also support the trend toward the development of combined early childhood and early childhood special education teacher training programs and state licensure that incorporates all recommended personnel standards from DEC and NAEYC. These personnel standards are necessary for individuals functioning in a variety of roles, including but not limited to (a) early childhood educators, (b) early childhood special educators, and (c) related services professionals.

Early Childhood Educator

Early childhood educators should possess a common core of knowledge and skills that includes content specific to young children, birth through age 8, both with and without disabilities. This content includes child development and learning, curriculum development and implementation, family and community relationships, assessment and evaluation, and professionalism with appropriate field experiences through which to apply this content. The early childhood educator may work directly with children birth through age 8, including children with a range of abilities and special needs, and work collaboratively with families and other professionals. This work may occur in a variety of settings such as public and private schools and centers, homes, and other facilities in which children within this age range and their families are served. In addition to the traditional role of teacher, the early childhood educator may assume a variety of roles that require specialized knowledge and skills, including but not limited to early childhood subject area teacher, parent education coordinator, social service coordinator, education coordinator, program administrator, and early childhood unit administrator (NAEYC, 1992; 1994).

Early Childhood Special Educator

Early childhood special educators should also possess a common core of knowledge and skills with the early childhood educator as well as specialized knowledge and skills regarding young children birth through age 8 with special needs and their families. This content includes child development and learning, curriculum development and implementation, family and community relationships, assessment and evaluation, and professionalism with appropriate field experiences through which to apply this content. The early childhood special educator may work directly with children with special needs who are in this age range or work in a collaborative relationship with early childhood educators, family members and other professionals serving young children with special learning and developmental needs and their families. The early childhood special educator may provide services in both public and private schools and centers, homes, hospitals, and other facilities in which young children and their families are served. Bricker (1989) discussed five major roles for early childhood special educators: conceptualizer, synthesizer, instructor, evaluator, and listener. The conceptualizer has a broad conceptual knowledge base of developmental processes and curricular domains. This broad conceptual base allows for flexibility in adapting for children with special needs. The synthesizer actively seeks input from other professionals and coordinates this information in planning programs and service delivery strategies for children and families. The instructor role encompasses direct work with children who have special needs, collaboration with families, and training for ancillary program staff. The evaluator develops an evaluation system that assesses outcomes of children and families and provides mechanisms for reporting to staff. The listener role is a support role for the family. It includes communication skills such as listening, questioning and problem-solving.

In an investigation of roles across 10 disciplines, Bailey (1989) identified roles specific to early interventionists with a special education background. These roles were: (a) to assess children's development; (b) to plan intervention programs; (c) to implement intervention services; (d) to coordinate interdisciplinary services; (e) to follow-through with recommendations from consultants; (f) to assess family resources, priorities, and concerns; (g) to plan and implement services for families; (h) to coordinate interagency services; (i) to conduct program evaluation; and (j) to serve as an advocate for children and families. Although delineated differently, it seems that the roles Bailey specified identify activities that can be subsumed under the broader conceptual role categories described by Bricker (1989) and can serve as a foundation for the content in these professional guidelines. It also seems apparent that these role categories are very similar to those assumed by the early childhood educator. Differences in the early childhood educator and early childhood special educator's roles arise, however, when one examines the manner and degree to which they implement each role. For example, the early childhood educator's primary roles in conducting assessment may be in conducting screening or in using informal procedures such as observation, whereas the early childhood special educator performs those assessment activities and, in addition, conducts diagnostic assessment, employing criterion-referenced measures for instructional programming, and synthesizes results into written reports.

As discussed earlier, with the shift in service delivery toward family-centered services and inclusion, the early childhood special educator is being required to shift roles from that of primarily providing direct services to indirect service delivery. When direct services are provided by the early childhood special educator, they are likely to be delivered within an

inclusion model as a team member (e.g., team teaching) or as a lead teacher, serving children both with and without special needs (i.e., reverse mainstreaming). Indirect service delivery roles continue to require the early childhood special educator to possess knowledge and skills in the roles identified by Bailey (1989) and Bricker (1989) to serve effectively as a consultant, collaborator, parent educator, program administrator, and staff development specialist for family members, other professionals, and paraprofessionals. In states that have adopted unified licensure requirements, the early childhood special educator should be a key team member who will typically assume more indirect service delivery roles such as consulting/collaborating with early childhood educators and related services professionals to ensure appropriate services for young children with special needs and their families.

Related-Services Professionals

Related-services professionals represent a variety of professional disciplines (e.g., physical therapy, occupational therapy, speech/language pathology, nursing, social work); they provide consultation and support to families and other professionals as well as direct services for children birth through age 8 with special needs. Related-services professionals should also possess a common core of knowledge and skills specific to young children with special needs and their families, along with specialized knowledge and skills in their own professional discipline.

Structure of Recommended Early Childhood Special Education Licensure

It is the intention of ATE, DEC, and NAEYC (1994) to provide a framework for personnel standards that is sufficiently flexible to allow states to plan within the context of local limitations, while also maintaining content-congruence (ATE/NAEYC, 1991) with the philosophy and assumptions discussed previously in this paper. In developing a structure for licensure standards, it is recommended:

1. State agencies should develop freestanding standards for licensure; that is, they should separate from existing general education elementary or secondary licenses and from existing elementary or secondary special education licenses (ATE, DEC, & NAEYC, 1994). This recommendation is based on the professional recognition that both early childhood and early childhood special education have distinctive knowledge bases that should drive the preparation of personnel for those fields (ATE/NAEYC, 1991b; McCollum et al., 1989). These licensure standards should apply to all individuals who work with young children with special needs and their families, including early childhood educators, early childhood special educators, and related services professionals.
2. These licensure standards should encompass birth through age 8 as the early childhood developmental period. Arguments have been made for entirely separate credentialling and training for those working with infants and toddlers. However, the most current regulations for Part H and Part B of P.L. 102-119 appear to lend support to avoiding an artificial demarcation between birth through age 3 vs. 3 through age 5 licensure, by adopting a more seamless perspective on services to young children. The legislation includes attention to transition and continued use of the IFSP throughout the preschool years. Linking the personnel requirements of Part H and Part B at the state level should ensure a commonality of philosophy and practices that would enable more seamless transitions between Part H and Part B services. This broad approach to defining early childhood should minimize implementation problems, enhance the possibility of mobility between roles, settings, and children served, and ensure that professionals are prepared to serve the children and families they are employed to serve. At the same time, recognizing that it is difficult to prepare individuals in a preservice program to be competent across the entire birth through 8 age range, licensure standards should support age-related subspecialties within a broader licensure pattern that may include at least two adjacent age spans (i.e., infant/toddler and preprimary or preprimary and primary school age).
3. Reciprocal licensure agreements across states should be developed to ensure the easy mobility of personnel and to ensure uniform standards. Reciprocal licensure agreements imply both age and content congruence across the United States.
4. Separate licenses for the early childhood educator and early childhood special educator should be clearly linked so as to encourage professional mobility between roles. This suggests the development of a career lattice (Bredekamp & Willer, 1992) within states that supports not only the upward mobility of professionals within a system but also the horizontal movement of professionals from one setting to another (e.g., Head Start to public school to child care), with comparable responsibilities and compensation. The link age of separate licensures also supports the option for unified early childhood/early childhood special education personnel preparation programs.

Content Standards for Early Childhood Special Education Licensure

Licensure standards for the early childhood special educator must articulate the common core of knowledge and skills required for all persons who work with young children with special needs and their families as well as specialization knowledge and skills. The common core of knowledge and skills should be derived from the fields of early childhood education, early childhood special education, and special education, with the specialization knowledge and skills based on the knowledge base from early childhood special education. The content of licensure standards must be congruent with the philosophy and assumptions identified in this paper and reflect the spirit and letter of federal regulations specific to serving young children with special needs and their families. Further, licensure standards should be performance-based, rather than course-based. They should ensure that personnel possess the knowledge and skills to work collaboratively as members of family-professional teams in planning and implementing services for young children with special needs in diverse community settings. Specifically, knowledge and skills should be demonstrated in the areas of (a) child development and learning, (b) curriculum development and implementation, (c) family and community relationships, (d) assessment and evaluation, and (e) professionalism. Application of knowledge and skills should be demonstrated through diverse field experiences.

Licensure standards should reflect the importance of ongoing professional development within state standards. Preservice training should focus on entry-level competence in two age spans of the birth through 8 age range. To become more competent in these subspecialties, to achieve competence in the full age range, or to specialize in a content or ability area, further training is necessary. Licensure standards, therefore, should recognize that graduate-level training is a desirable component of a career lattice for all professionals working with young children with special needs and seeking greater degrees of specialization in early childhood development and service delivery.

Guidelines for Preparation of Early Childhood Special Education Professionals

The competent early childhood special educator demonstrates a common core of knowledge and skills for working with young children with special needs and their families as well as specialization knowledge and skills in at least two of the age subspecialties. The following guidelines describe the specific standards required for the common core and the specialization. These guidelines apply to entry-level licensure whether the training is acquired at the undergraduate or graduate level. These guidelines reflect the philosophy and assumptions discussed previously in this paper and are based on recommended practices derived from theory and research. The guidelines also imply that faculty and supervisors in training programs will be qualified in the area(s) for which they are providing training and supervision. To promote consistency with the NAEYC Guidelines for Preparation of Early Childhood Professionals (NAEYC, 1994) and to facilitate states using the option to develop combined certifications, the performance standards include the categories of (a) child development and learning, (b) curriculum development and implementation, (c) family and community relationships, (d) assessment and evaluation, (e) field experiences, and (f) professionalism.

Basic Guidelines for 4- and 5-Year Institutions (Initial Licensure)

1. Child Development and Learning
   Programs prepare early childhood special educators to:
   - 1.1 Apply theories of child development, both typical and atypical, and apply current research with emphasis on cognitive, motor, social-emotional, communication, adaptive, and aesthetic development in learning situations family and community contexts.
   - 1.2 Identify pre-, peri-, and postnatal development and factors such as biological and environmental conditions that affect children's development and learning.
   - 1.3 Identify specific disabilities, including the etiology, characteristics, and classification of common disabilities in young children, and describe specific implications for development and learning in the first years of life.
   - 1.4 Apply knowledge of cultural and linguistic diversity and the significance of socio-cultural and political contexts for development and learning, and recognize that children are best understood in the contexts of family, culture, and society.
   - 1.5 Demonstrate understanding of (a) developmental consequences of stress and trauma, (b) protective factors and resilience, (c) the development of mental health, and (d) the importance of supportive relationships.
2. Curriculum Development and Implementation
   Programs prepare early childhood special educators to:
   - 2.1 Plan and implement developmentally and individually appropriate curricula and instructional practices based on knowledge of individual children, the family, the community, and curricula goals and content.
     - 2.1.1 Make specific adaptations for the special needs of children who have unique talents, learning and developmental needs, or specific disabilities.
     - 2.1.2 Develop an IFSP or IEP, incorporating both child and family outcomes, in part-

nership with family members and other professionals.

2.1.3 Incorporate information and strategies from multiple disciplines in the design of intervention strategies.

2.1.4 Design plans that incorporate the use of technology, including adaptive and assistive technology.

2.1.5 Develop and select learning experiences and strategies that affirm and respect family, cultural, and societal diversity, including language differences.

2.1.6 Plan for and link current developmental and learning experiences and teaching strategies with those of the next educational setting.

2.1.7 Select intervention curricula and methods for children with specific disabilities including motor, sensory, health, communication, social-emotional, and cognitive disabilities.

2.1.8 Support and facilitate family and child interactions as primary contexts for learning and development.

2.1.9 Implement developmentally and functionally appropriate individual and group activities using a variety of formats, including play, environmental routines, parent-mediated activities, small group projects, cooperative learning, inquiry experiences, and systematic instruction.

2.1.10 Develop and implement an integrated curriculum that focuses on children's needs and interests and takes into account culturally valued content and children's home experiences.

2.1.11 Select, develop, and evaluate developmentally and functionally appropriate materials, equipment, and environments.

2.1.12 Demonstrate appropriate use of technology, including adaptive and assistive technology.

2.1.13 Employ pedagogically sound and legally defensible instructional practices.

2.2 Use individual and group guidance and problem-solving techniques to develop positive and supportive relationships with children, to encourage and teach positive social skills and interaction among children, to promote positive strategies of conflict resolution, and to develop personal self-control, self-motivation, and self-esteem.

2.2.1 Select and implement methods of behavior support and management appropriate for young children with special needs, including a range of strategies from less directive, less structured methods (e.g., verbal support and modeling) to more directive, more structured methods (e.g., applied behavior analysis).

2.3 Establish and maintain physically and psychologically safe and healthy learning environments that promote development and learning.

2.3.1 Provide a stimulus-rich indoor and outdoor environment that employs materials, media, and technology, including adaptive and assistive technology.

2.3.2 Organize space, time, peers, materials, and adults to maximize child progress in group and home settings.

2.3.3 Implement basic health, nutrition and safety management practices for young children, including specific procedures for infants and toddlers and procedures regarding childhood illness and communicable diseases.

2.3.4 Implement nutrition and feeding strategies for children with special needs.

2.3.5 Use appropriate health appraisal procedures and recommend referral and ongoing follow-up to appropriate community health and social services.

2.3.6 Identify aspects of medical care for premature, low birth weight, and other medically fragile babies, including methods employed in the care of young children dependent on technology and implications of medical conditions on child development and family resources, concerns, and priorities.

2.3.7 Recognize signs of emotional distress, child abuse, and neglect in young children and follow procedures for reporting known or suspected abuse or neglect to appropriate authorities.

3. Family and Community Relationships

Programs prepare early childhood special educators to:

3.1 Establish and maintain positive, collaborative relationships with families.

3.1.1 Apply family systems theory and knowledge of the dynamics, roles, and relationships within families and communities.

3.1.2 Demonstrate sensitivity to differences in family structures and social and cultural backgrounds.

3.1.3 Assist families in identifying their resources, priorities, and concerns in relation to their child's development.

3.1.4 Respect parents' choices and goals for children and communicate effectively with parents about curriculum and children's progress.

3.1.5 Involve families in assessing and planning for individual children, including children with special needs.

3.1.6 Implement a range of family-oriented services based on the family's identified

resources, priorities, and concerns.

3.1.7 Implement family services consistent with due process safeguards.

3.1.8 Evaluate services with families.

3.2 Collaborate/consult with other professionals and with agencies in the larger community to support children's development, learning, and well-being.

3.2.1 Apply models of team process in diverse service delivery settings.

3.2.2 Employ various team membership roles.

3.2.3 Identify functions of teams as determined by mandates and service delivery needs of children and families.

3.2.4 Identify structures supporting interagency collaboration, including interagency agreements, referral, and consultation.

3.2.5 Participate as a team member to identify dynamics of team roles, interaction, communication, team-building, problem-solving, and conflict resolution.

3.2.6 Employ two-way communication skills.

3.2.7 Evaluate and design processes and strategies that support transitions among hospital, home, infant/toddler, preprimary, and primary programs.

3.3 Administer, supervise, and consult with/instruct other adults.

3.3.1 Employ adult learning principles in supervising and training other adults.

3.3.2 Facilitate the identification of staff development needs and strategies for professional growth.

3.3.3 Apply various models of consultation in diverse settings.

3.3.4 Provide consultation and training in content areas specific to services for children and families and organization/development of programs.

3.3.5 Provide feedback and evaluate performance in collaboration with other adults.

4. Assessment and Evaluation

Programs prepare early childhood special educators to:

4.1 Assess children's cognitive, social-emotional, communication, motor, adaptive and aesthetic development.

4.1.1 Select and use a variety of informal and formal assessment instruments and procedures, including observational methods, to make decisions about children's learning and development.

4.1.2 Select and administer assessment instruments and procedures based on the purpose of the assessment being conducted and in compliance with established criteria and standards.

4.1.3 Develop and use authentic, performance-based assessments of children's learning to assist in planning, to communicate with children and parents, and to engage children in self-assessment.

4.1.4 Involve families as active participants in the assessment process.

4.1.5 Participate and collaborate as a team member with other professionals in conducting family-centered assessments.

4.1.6 Communicate assessment results and integrate assessment results from others as an active team participant in the development and implementation of the individual education program (IEP) and individual family service plan (IFSP).

4.1.7 Monitor, summarize, and evaluate the acquisition of child and family outcomes as outlined on the IFSP or IEP.

4.1.8 Select, adapt, and administer assessment instruments and procedures for specific sensory and motor disabilities.

4.1.9 Communicate options for programs and services at the next level and assist the family in planning for transition.

4.1.10 Implement culturally unbiased assessment instruments and procedures.

4.2 Develop and use formative and summative program evaluation to ensure comprehensive quality of the total environment for children, families, and the community.

5. Professionalism

Programs prepare early childhood special education professionals to:

5.1 Articulate the historical, philosophical, and legal basis of services for young children both with and without special needs.

5.2 Identify ethical and policy issues related to educational, social, and medical services for young children and their families.

5.3 Identify current trends and issues in Early Childhood Education, Early Childhood Special Education, and Special Education.

5.4 Identify legislation that affects children, families, and programs for children.

5.5 Adhere to the profession's code of ethical conduct.

5.6 Serve as advocates on behalf of young children and their families, improved quality of programs and services for young children, and enhanced professional status and working conditions for early childhood special educators.

5.7 Reflect upon his/her own professional practice and develop, implement, and evaluate a professional development plan.

5.8 Participate actively in professional organizations.

5.9 Read and critically apply research and recommended practices.

6. Field Experiences

Programs prepare early childhood special educators by having them:

6.1 Observe and participate under the supervision of qualified professionals in a variety of settings in which young children with special needs, from birth through age 8, and their families are served (e.g., homes, public and private centers, schools, community agencies).

6.2 Work effectively with children of diverse ages (i.e., infants, toddlers, preschoolers, primary school-age), with children with diverse abilities, with children reflecting culturally and linguistically diverse family systems.

6.3 Participate under supervision as an inter-agency and intra-agency team member.

6.4 Provide consultation services under supervision.

6.5 Demonstrate ability to work effectively during supervised student teaching and/or intensive, ongoing practica experiences (totalling at least 300 clock hours) in at least two different settings, serving children of two different age groups (i.e., infant/toddler, preprimary, or primary) and with varying abilities.

6.6 Analyze and evaluate field experiences, including supervised experience in working with families and other professionals.

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